File with:

lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A



Disclosure Board 510 E. 12 th , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073 COMMITTEE NAME (Must be same as on Statement of Organization)				2000 TOLLO		
				09 JAN 13 AH 11: 13		
Jefferson County Republican Women				FORM	1	
(1)Statewide/Legislative/Judge \$ (4)County Central Committee (5)	of committee you are reporting for: Standing for Retention Candidate (5)County Candidate (6)City Cand ty PAC (9)City PAC (10)School		al C (DR-2 (Rev. 07/2007) For Office Use	9540	
CANDIDATE COMMITTEES Candidate Name	ONLY:	Political Party (if applicable)				
Office Sought		District (if Senate or House)		Audited		
	Reneker	3 19 · 293 · 63. TELEPHONE	``	.,,	•	
I AM FILING AJanuary 1	9, 2009	REPORT FOR (1) ELECTION	N /(<u>2)N</u> O	N-ELECTION \	ÆAR.	
(report date) Indicate by #		#				
☐CHECK IF AMENDMENT T	O REPORT DATED		Local Co	committees, enter	Date of Election	
	ation) report and attach Notice o file reports until a DR-3 is file			& Local Committe Election is held	es, enter County in	
STATEM	ENT OF CASH ON HAN	D				
CASH ON HAND at the begins committee. This amo	ning of the reporting period. (To bunt MUST be the same as the	otal of all funds held by the	·	\$ 543.85		
ADD TOTAL MONE	Y TAKEN IN THIS PERIOD					
Schedule A: Cash C	ontributions total (Attach Sched	dule A) (*also see in-kind below)		0.00		
Schedule F: Loans F	Received total (Attach Schedule	F)				
Schedule H: Total S	ales of Campaign Property (Att	ach Schedule H)				
(Schedule I	Happlies to Candidates' Com	<u>mittees Only)</u> SUB-TOTAL	************	\$ 543.85		
SUBTRACT TOTAL	MONEY SPENT THIS PERIO)				
Schedule B: Expend	litures total (Attach Schedule B) (**also see debts and loans below)	224.52		
Schedule F: Loan Re	epayments total (Attach Schede	ule F)				
CASH ON HAND at the end of	f this reporting period (if final re	port balance must be zero)		\$ 319.33		
**UNPAID BILLS (From Schee	dule D - Attach Schedule D)			\$		
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sche	edule E)		\$		
**OUTSTANDING LOANS (Fr	om Schedule F - Attach Sched	ule F)		\$		
CONSULTANT BREAKDOW		•		YES	NO	
CANDIDATE COMMITTEES	1 (551154415 571114511541)					

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF INDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Jefferson County Republican Women

Fairfield IA 52556 ID# Fairfield Ledger five ads	DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1-24-2008 CK# Fairfield IA 52556 1D# CK# ID# CK#	1-10-2008	CK#985	112 E Broadway	ad	\$ ^{42.72}
CK# ID# CK#	1-24-2008		112 E Broadway	five ads	181.80
CK# ID# CK# ID# CK# ID# CK# ID# CK# ID# CK#					
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		1			
SUB-TOTAL \$		CK#			
TOTAL (if last page of this schedule) \$ 224.52					<u> </u>

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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